

**EXECUTIVE LOBBYING  
REGISTRATION/ RENEWAL FOR  
THE YEAR OF 2008**  
(Fill in year.)

1633  
Executive Lobbyist Registration No.

**Instructions**

- Print in ink or type.
- Complete form and return with \$110 registration fee to the Board of Ethics, 2415 Quail Dr., 3<sup>rd</sup> Floor, Baton Rouge, LA 70808, (225) 763-8777 or (800) 842-6630.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Registrations expire as of December 31 unless a renewal is submitted between December 1 and January 31.

1. NAME Watson Jermaine  
Last First MI

2. BUSINESS PHONE 225-381-7135  
Area Code and Phone Number

3. FAX NUMBER 225-336-4306

4. BUSINESS ADDRESS 564 Laurel St. Baton Rouge LA 70801  
Street and No. City State Zip

MAILING ADDRESS 564 Laurel St. Baton Rouge LA 70801  
Street and No. City State Zip

5. EMPLOYER Baton Rouge Area Chamber

6. EMPLOYER'S ADDRESS 564 Laurel St. Baton Rouge LA 70801  
Street and No. City State Zip

7. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name Baton Rouge Area Chamber

Address 564 Laurel St. Baton Rouge LA 70801

Business or purpose economic development

Does this person pay you? yes

If No, who pays you? \_\_\_\_\_

FOR OFFICE USE ONLY  
Postmark Date: 1/23/08

Reg-08  
OK'd 1/28/08  
\$110.00

OK'd

RECEIVED  
JAN 21 2008

3070749

MAILED

**EXECUTIVE LOBBYING  
REGISTRATION FORM**

Executive Lobbyist Registration No. \_\_\_\_\_

2. Name \_\_\_\_\_

Address \_\_\_\_\_

Business or purpose \_\_\_\_\_

Does this person pay you? \_\_\_\_\_

If No, who pays you? \_\_\_\_\_

3. Name \_\_\_\_\_

Address \_\_\_\_\_

Business or purpose \_\_\_\_\_

Does this person pay you? \_\_\_\_\_

If No, who pays you? \_\_\_\_\_

4. Name \_\_\_\_\_

Address \_\_\_\_\_

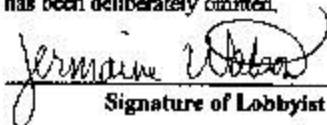
Business or purpose \_\_\_\_\_

Does this person pay you? \_\_\_\_\_

If No, who pays you? \_\_\_\_\_

**CERTIFICATION OF ACCURACY**

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief, and that no information required by LSA-R.S. 49:71 et seq. has been deliberately omitted.

  
Signature of Lobbyist

